Quality of Life and Community Gardens: African refugees and the Griffith University Community Food Garden

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This research was conducted in accordance with the National Statement on Ethical Conduct in Research Involving Humans with ethical clearance approved by the Griffith University Ethics Sub-Committee for Experimentation on Humans.

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Abstract

One of Australia's foremost public health challenges is to meet the unique health requirements of refugees settling in this country. There is compelling evidence that community gardens can enhance health and overall quality of life (QoL) by influencing physical activity, psychosocial fulfilment and food choices; particularly important among vulnerable populations such as refugees. This study explored how African refugee perceptions of QoL are influenced by participation in a campus-based community garden, the Griffith University Community Food Garden (GUCFG).

This qualitative case study was underpinned by the theory of ethnography and involved six in-depth, semi structured interviews as the primary data collection method. Additionally, participant observations were used to inform data collection, interpretation, and analysis.

Three key elements emerged as having an influence on perceptions of QoL: using the garden as a physical space, participation, and garden membership. Being a member of the garden contributed to participants' trust, mutual aid and reciprocity among gardeners, and sense of belonging to the garden. Participation in the garden allowed for skills and knowledge sharing, meaningful labour, and increased physical activity. The garden space provided otherwise unavailable space to grow nutritious and culturally appropriate food.

Garden participation improved perceived QoL in this group of African refugees, suggesting this as a valid mechanism to enhance QoL, and therefore health, of refugee populations and assist their settlement into Australian communities.

Research Question

Refugee health and wellbeing presents one of the greatest challenges to global public health (Dualeh & Paul, 2002; Manandhar et al, 2006). Having been displaced(Dualeh & Paul, 2002) from their homelands and forced into migration through issues such as civil war and violent political regimes, refugees often experience high rates of physical and psychological trauma and are recognised as one of the most marginalised and disadvantaged sub-populations in society (Grondin, 2004; Sheikh-Mohammed et al, 2006). Conditions of social exclusion, poverty and barriers to adequate health services can

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compound existing health issues(Grondin, 2004; Gushulak & MacPherson, 2006; Muecke, 1992; Sheikh-Mohammed et al, 2006), presenting serious public health implications in host countries such as Australia.

The need for appropriate health interventions which address the specific health needs of refugee populations settling in Australia is required to meet this public health challenge. Nutrition has been identified as an important health need, with African refugee populations in Australia exhibiting the dual burden of elevated prevalence of both undernutrition and overnutrition (Renzaho et al., 2006).

There is evidence that participation in community gardens has the potential to enhance health and wellbeing, and improve overall quality of life (QoL) of participants(Armstrong, 2000; Baker, 2004; Myers, 1998; Wakefield et al., 2007). Community gardening influences physical activity and psychosocial fulfilment and has impacts on diet by increasing supplies of fresh nutritious food and influencing food choices(Armstrong, 2000; Austin EN et al., 2006; Somerset S et al., 2005). Particularly important among disadvantaged and vulnerable populations such as migrants and people suffering mental illness, is the potential for community gardens to include marginalised populations in social, collective work where they can acquire skills, access nutritious and culturally appropriate food and enjoy the therapeutic benefits of nature in a healthy, safe environment(Armstrong, 2000; Austin et al, 2006; Myers, 1998; Schmelzkopf, 1996).

The anecdotal evidence of the potential for community gardens to influence migrant health abounds, yet very few published studies exist. Moreover, there is a paucity of published research specifically pertaining to the health benefits of community gardens for migrant and refugee populations in Australia. The establishment of The Griffith University Community Food Garden (GUCFG) on the Logan campus in 2005, which is utilised predominantly by African refugees,, provides an opportunity to research how community gardens can influence African refugee perceptions of QoL.

The goal of the present study was to explore how African refugee perceptions of QoL are influenced by participation in a community garden.

The specific objectives were to:

- 1. Understand how African refugees perceive the elements of QoL, social capital, human capital, built capital and natural capital, to be influenced by the GUCFG.
- 2. Understand how the influence of social, human, built and natural capital resulting from the GUCFG combine to influence African refugee perceptions of quality of life.

The conceptual framework for this study is outlined in Figure 1.

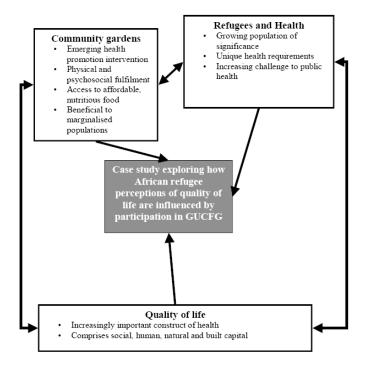


Figure 1. Conceptual framework for study design

Methods

This qualitative case study comprised six in-depth semi-structured interviews, with a purposive sample of garden participants. Interviews examined participants' perceptions of QoL as influenced by the GUCFG with respect to social, human, built, and natural capital. The interviews were conducted by the researcher and facilitated by a translator where required. Interviews were audio recorded with a digital recording device and subsequently transcribed verbatim to hard copy.

All active and passive GUCFG members were eligible to participate in the study. Assistance with recruitment of the study sample was sought from a Community Development Officer from a community agency collaborating on the GUCFG, who was familiar with the activities of the garden participants.

Participant-observations in the field were also conducted in the current study. Observations were not recorded and do not form a formal part of the findings of the current research, but positioned the researcher within the research topic and assisted in forming the direction of the research and interpretation of the findings.

Results

Thematic analysis of the interview transcripts revealed three factors in relation to GUCFG which refugees considered to be important to their QoL:

- 1. The physical garden space of the GUCFG.
- 2. Participation in gardening activities and;
- 3. Membership of the garden community

These factors are overviewed in the following paragraphs. The words of participants have been included as evidence of the findings.

Physical Garden Space

The GUCFG as a physical space was generally perceived by participants as significant in influencing QoL. Being provided with a space to garden was important to participants since it was often the only space available to them to grow nutritional, culturally appropriate food. This made an important contribution to participant health through positive food choices and availability of food as illustrated by the following quote:

'When she digs her own farm and grows the way she knows, then she will eat what she knows.'

Allocation of plot sizes and insecure land tenure in relation to the physical garden space emerged as a negative influence on perceived QoL, which is important due to the potential to impede participation. Participants expressed some dissatisfaction with the size of individual plots allocated and uncertainty over their gardening future, causing some degree of frustration and distress.

'The space is too small; it's too small for him to do what he wants. He explained that the bigger the place to go to farm, the more produce they get. He still feels it is a good thing for him, but he is frustrated because he can't use his skills, can't use his type of farming, in this small space.'

Participation in Gardening Activities

Participation allowed gardeners to utilise knowledge and skills of farming and in turn gain knowledge and skills specific to gardening in Australia. By utilising these skills participants were able to engage in meaningful labour which they saw as an important contribution to their health and wellbeing and subsequently an important contribution to QoL.

'She says "my father was a farmer. Both my parents were farmers. It's knowledge and skills that's passed down through the generations". She was just given a place and she's doing everything according to her knowledge and talent basically. She plants them the way she knows it.'

'To know Australian culture in terms of farming, that is what he wants to know because he figures that the seasons are different and the temperature's different, he is learning skills...Australian ways of farming.'

The GUCFG engaged gardeners in physical activity which they saw as an appropriate form of exercise and an extension of farming in Africa, which participants had always viewed as important to QoL.

'He says if you're a farmer, it covers the whole part of your life, in terms of exercising and in terms of your whole wellbeing. It is very important for him to be in the farm for the whole total wellbeing.'

Resources provided by the GUCFG were seen as adequate and an enabling factor to participation, with gardeners expressing that they would not have the means to personally acquire such resources as tools and equipment essential for gardening.

Membership of the GUCFG Community

Simply being a member of the GUCFG was significant to participant perceptions of QoL through its contribution to trust, mutual aid and reciprocity, and sense of belonging and is illustrated by the following quote:

'It brings a lot of, not only satisfaction but relief, sense of belonging and you feel people understand you, you feel people... you're part of that community that you're in.'

Being given the opportunity to be a part of the GUCFG established a sense of trust among participants and Australian people by giving them an opportunity to preserve a traditional practice; something they did not expect. Trust was also developed between garden participants at the GUCFG through the establishment of relationships, being connected by common ideals, and the opportunity to get to know other gardeners.

The exchange of produce between gardeners was also seen as having an important influence on trust, and mutual aid and reciprocity. Sharing and exchanging produce afforded gardeners opportunities for greater socialisation and access to produce.

'Like last year, I grow maize and peanut in the garden there and cassava, so I used to give it to my friends. It's a good thing to give it because if I have something they need I can give and if they have something I need, they can give to me also.'

Conclusions

Garden participation improved perceived QoL in this group of African refugees, suggesting this as a valid mechanism to enhance QoL, and therefore health, of refugee populations and assist their settlement into Australian communities. The issues of physical space, participation and membership were identified as particularly important. These findings support community gardens as a viable setting to target health issues in this population.

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